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CONFIRMATION NO. 8357

Bib Data Sheet

SERIAL NUMBER 10/769,353	FILING DATE 01/30/2004 RULE	CLASS 399	GROUP ART UNIT 2852	ATTORNEY DOCKET NO. 81715/LPK
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APPLICANTS

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GERMANY 103 04 763.8 02/05/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/14/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>H5</i> Examiner's Signature	Initials	DRAWING 1	CLAIMS 9	CLAIMS 1

ADDRESS

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TITLE

Method for correction of the calibration of a register mark accurate printing process

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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